



# SAFETY TOWN REGISTRATION FORM



Safety Town is a hands-on interactive program designed to teach young children vital safety concepts. \*Only children who are preparing to enter kindergarten in the fall of 2007 are eligible to attend Safety Town (free of charge), which means they must be five (5) years old by September 30, 2007, and must be a York County resident.

**WE WILL BEGIN ACCEPTING REGISTRATIONS on MONDAY, May 14, 2007.** Registrations will be accepted on a "first-come, first-served" basis until all available slots are filled, or until the **deadline of Friday, May 25, 2007.** ***Registrations will only be accepted by mail or by hand-delivery to the address below.*** Please note that **hand-delivered registrations will only be accepted from the caregiver of the child being registered, and mailed registrations received before the beginning of the registration period will be processed at random after registration begins.** If all slots are filled by the time we receive your registration form, your child's name will be placed on a waiting list. Please detach the bottom portion and return the completed form to:

Safety Town Registration  
York County Department of Community Services  
224 Ballard Street  
Yorktown, Virginia 23690

You will receive written confirmation of your child's registration status by Monday, June 11, 2007. If you have not received confirmation by this date, please contact Gianna Pack. For further information, or to cancel your child's registration at any time, please call Gianna Pack at 890-3880.

*\* Children who are non-York County residents (but meet the age guidelines) may be eligible to register for Safety Town for a fee of \$25.00 after the deadline date, space permitting. Please call Gianna Pack at 890-3880 for information on this opportunity.*

**PROGRAM HOURS: 9:00 AM - 11:30 AM, Monday – Friday  
(Only 50 spaces available per week)**

**School Your Child will be  
Attending in the Fall:**

\_\_\_\_\_  
(Name of School)

I would like my child to attend:

- |                          |                         |   |
|--------------------------|-------------------------|---|
| <input type="checkbox"/> | July 9 - 13, 2007       | Mt. Vernon Elementary School – 310 Mount Vernon Drive         |
| <input type="checkbox"/> | July 16 - 20, 2007      | Mt. Vernon Elementary School – 310 Mount Vernon Drive         |
| <input type="checkbox"/> | July 23 - 27, 2007      | Mt. Vernon Elementary School – 310 Mount Vernon Drive         |
| <input type="checkbox"/> | July 30- August 3, 2007 | Magruder Elementary School – 700 Penniman Road (Williamsburg) |

Print Child's Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

☐ Male ☐ Female Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent Work Phone: \_\_\_\_\_ / \_\_\_\_\_  
Father Mother

I (we) the below signed certify (1) that we agree to assume all risks in connection with the Safety Town program and do hereby release, absolve, indemnify, and hold harmless the County of York and its employees and representatives involved in the program, and (2) that the responsibility for carrying appropriate medical plans, including hospitalization, lies with the below signed.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date